

Express Mail No.: EV312711350US  
Date of Deposit: 6/21/04

06-23-04  
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax (703) 746-4000**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

30623 7590 03/23/2004

MINTZ, LEVIN, COHN, FERRIS, GLOVSKY  
AND POPEO, P.C.  
ONE FINANCIAL CENTER  
BOSTON, MA 02111

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/377,081	08/19/1999	PATRICIA GRASSO	19705-001-(A)	7358

TITLE OF INVENTION: LEPTIN-RELATED PEPTIDES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	06/23/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAOUD, CHRISTINE J	1647	514-014000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Mintz, Levin, Cohn, Ferris,  
Glovsky and Popeo, P.C.  
Ivor R. Elrifi, Esq.  
Naomi S. Biswas, Esq.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE  
CLF Medical Technology Acceleration Program, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)  
Clifton Park, NY

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☒ Advance Order - # of Copies ten (10)

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 19705-001 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Chad E. Bell (48,128) (Date) 6/21/04

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

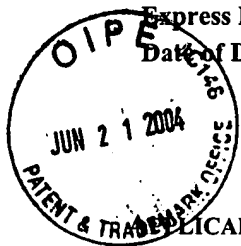
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06/25/2004 RHEBRAH1 00000005 09377081

01 FC:2501  
02 FC:8001

665.00 DP  
30.00 DP

TRANSMIT THIS FORM WITH FEE(S)



Express Mail Label No.: EV312711350US

Date of Deposit: June 21, 2004

Attorney Docket No: 19705-001

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**APPLICANT:** Grasso *et al.*

**APPLICATION NUMBER:** 09/377,081      **EXAMINER:** Christine Saoud

**FILING DATE:** August 19, 1999      **ART UNIT:** 1647

**FOR:** LEPTIN-RELATED PEPTIDES

**MAIL STOP ISSUE FEE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL LETTER**

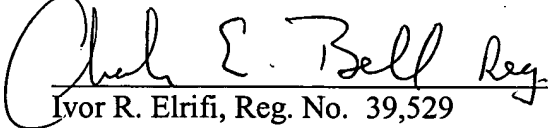
Transmitted herewith for filing in the above-referenced patent application are the following documents:

- Response to Notice of Allowance and Issue Fee Due (1 pg.);
- Part B - Issue Fee Transmittal (1 pg., in duplicate);
- Check No. 18848 in the amount of \$695.00; and
- Return Postcard.

If the enclosed papers are considered incomplete, the Mail Room is respectfully requested to contact the undersigned collect at the number provided below. No additional fees are believed due in connection with this submission. However, the Commissioner is hereby authorized to charge any additional fees that may be due, or credit any overpayment of same, to Deposit Account No. 50-0311; Reference No. 19705-001. A duplicate copy of this Transmittal Letter is enclosed.

Respectfully submitted,

Dated: June 21, 2004

*for.*  Reg. No. 48,128  
Ivor R. Elrifi, Reg. No. 39,529

Attorney for Applicant  
c/o MINTZ, LEVIN, COHN, FERRIS,  
GLOVSKY and POPEO, P.C.  
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Fax: (617) 542-2241

Please address all correspondence to Customer No.: 30623.



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**RESPONSE TO NOTICE OF ALLOWANCE AND ISSUE FEE DUE**

In response to the Notice of Allowance and Fee(s) Due, mailed March 23, 2004, the following is submitted herewith for filing in the above-referenced application:

- Part B of Form PTOL-85 (Fee(s) Transmittal) (1 pg.); and
- Check No. 18848 in the amount of \$695.00 covering the issue and publication fees, and the fee for an advance order of 10 softcopies of the patent.

Although no other fees are believed due, the Commissioner is hereby authorized to charge any additional fees that may be due, or to credit any overpayment, to Account 50-0311, Ref. No. 19705-001. An extra copy of Part B of Form PTOL-85 is enclosed for this purpose.

Respectfully submitted,

for: Chah E. Bell Reg. No. 48,128  
Ivor R. Elrifi, Reg. No. 39,529  
Attorney for Applicant  
MINTZ, LEVIN, COHN, FERRIS,  
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Tel: (617) 542-6000  
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Dated: June 21, 2004

**Please address all correspondence to Customer No. 30623.**